

Date: 06/06/11



Environmental Management Consolidated Business Center (EMCBC)

Subject: Physical Fitness Program

Program Description

APPROVED: (Signature on File)

EMCBC Director

ISSUED BY: Office of Finance Management

1.0 PURPOSE

To establish the Environmental Management Consolidated Business Center's (EMCBC) voluntary physical fitness program to promote the physical fitness of employees.

2.0 SCOPE

This program is established in recognition that certain fitness activities lead to a healthier and more productive employee. Employee participation requirements are voluntary and outlined in this Program Description. It will provide EMCBC employees with an opportunity to have a portion of one (1) individual general membership for a physical fitness facility or program that meets the criteria outlined in the Requirements section below, paid for by the DOE. The Physical Fitness Program is not an activity involving the performance of official work duties.

3.0 APPLICABILITY

This Program is applicable to all EMCBC employees, servicing sites with a Service Level Agreement (SLA) in place.

4.0 REQUIREMENTS

- 4.1 5 USC Section 7901, Health Service Programs, "The head of each agency or the Government of the United States may establish, within the limits of appropriations available, a health service program to promote and maintain the physical and mental fitness of employees under her/his jurisdiction."
- 4.2 31 USC Section 1341 (a)(1)(A), Anti-Deficiency Act, "An Officer or employee of the United States Government or of the District of Columbia government may not make or authorize an expenditure or obligation exceeding an amount available in an appropriation or fund for the expenditure or obligation."
- 4.3 The U.S. Office of Personnel Management's Employee Health Services Handbook, Ch. 2: Providing Physical Fitness Programs.

5.0 DEFINITIONS

- 5.1 Physical Fitness Program: A physical fitness program which meets the requirements for approval for the EMCBC Physical Fitness guidelines is one that provides a means by which an individual is engaged in an ongoing preventive program designed to improve or maintain an employee's cardiovascular endurance, muscular strength and endurance, flexibility, and body composition. Examples of such programs include cardiovascular endurance equipment/activities, flexibility equipment/activities, aerobic exercise classes, weight lifting instruction, stretching classes (i.e., yoga and pilates), and screening for health risks. One time fees for registration in competitive fitness or sports activities such as golf, skiing, equestrian activities, swimming, running, and team sports such as volleyball, basketball, baseball, and football will not be reimbursed. In addition, fees related to recreational licenses or fees for occasional participation in sports tournaments do not meet the requirements of this program.
- 5.2 Physical Fitness Facility: A facility which meets the requirements for approval for the EMCBC Physical Fitness Program is one which provides bona fide preventive health program services and activities, such as: cardiovascular endurance equipment/activities; flexibility equipment and activities; equipment orientations; fitness evaluations/assessments; and exercise plans. Furthermore, such a facility should include basic features such as shower and locker room facilities, as well as appropriate mechanisms or procedures to minimize the possibility of personal injury. If available at no additional cost, the facility may include swimming pools, instructional and education services, weight management and fitness testing.
- 5.3 General Membership Costs to be Covered: Under the authorized appropriation, the EMCBC will reimburse a participating employee annually for 100%, up to \$200.00, of one (1) general individual membership in an approved Physical Fitness Program. The program will be conducted on a fiscal year basis with employees being reimbursed on a semiannual and/or annual basis.
- 5.4 Costs Not Covered: The EMCBC will not reimburse a participating employee for any additional costs to be incurred by the participating employee such as the difference between an individual membership and a family membership, court fees, sports equipment, or professional fitness training, assistance, or classes not provided for under the general membership.
- 5.4.1 The EMCBC will not reimburse any cost for an employee who would otherwise be eligible for reimbursement when a "no cost" exercise facility is available to the employee at his/her work location.

6.0 RESPONSIBILITIES

- 6.1 EMCBC Director – will authorize the EMCBC Physical Fitness Program.
- 6.2 EMCBC Physical Fitness Administrator – will review and approve all EMCBC Physical Fitness Program Application Forms and submit forms for reimbursement.

- 6.3 Each EMCBC employee is eligible for the fitness program and is responsible for obtaining his/her own membership in an approved health club/fitness center or fitness program. Applications for participation will be accepted at anytime throughout the year and reimbursement will cover the entire participation period. However, initial reimbursement will be made following the participation at a facility or in a program for six (6) months or more during a usage period (i.e., an employee joining in June will be reimbursed for eleven (11) months the following May). Usage periods are defined as May 1 through October 31 and November 1 through April 30. See Attachment A for EMCBC Physical Fitness Program Application Form.
- 6.3.1 Because the government is providing a reimbursement, the employee must submit proof of payment with his/her submitted vouchers to the EMCBC Physical Fitness Administrator to reflect ongoing participation in an approved fitness program, in order to receive reimbursement for membership fees up to \$200 per year. The amount of \$200 is a maximum amount payable for reimbursement within a twelve (12) month period in a fitness program at an approved facility and payment will be made at six (6) month intervals. The government will only reimburse for the cost of the employee's fitness program. If the employee elects to obtain a family membership, the fitness center must provide documentation regarding how much of the total cost or fee for the family represents the employee's membership portion. See Attachment B for EMCBC Reimbursement Voucher for Employee Fitness Program.
- 6.4 The EMCBC Physical Fitness Administrator will review submitted vouchers at the end of the first and each subsequent six-month usage period. The EMCBC Physical Fitness Administrator will process the submitted vouchers through the Finance Department for reimbursement.
- 6.5 Reimbursement is contingent on the employee certifying that he/she utilized the fitness center or physical fitness program facilities an average of at least once a week (i.e., minimum 26 times during a usage period). See Attachment B for EMCBC Reimbursement Voucher for Employee Fitness Program. In the event that, due to unforeseen circumstances, the employee is not able to utilize his/her membership for the prescribed number of times in a usage period, he/she should notify the EMCBC Physical Fitness Administrator for evaluation of the situation.
- 6.6 An employee terminating employment forfeits his/her participation and any reimbursement for the usage period in which the termination occurs.
- 6.7 Employees will submit request for reimbursement at the end of each six (6) months usage period during reimbursement periods of May 1-15 and November 1-15 of each year.
- 6.8 Employees agree to consult a physician and/or undergo a health/fitness assessment in order to determine an appropriate exercise program.
- 6.9 Employee participation in a physical fitness program is voluntary, for the employee's personal benefit, and in no way involves the performance of the employee's official work duties.

- 6.10 Employees participating in a physical fitness program agree that neither the United States Government, the EMCBC, nor any of their staff shall be liable for any personal harm, injury, or death that may occur to the employee or any other person or entity as a result of the employee's use of the facilities, equipment, exercise activities, or diet including but not limited to any injury that may be sustained as a result of ill health or a pre-existing condition.
- 6.11 Employees agree to indemnify and hold harmless the United States Government, the EMCBC, or their agents and employees from any claims, demands, and causes of action of every kind and character on account of bodily injuries, death, or damage to, or loss of property arising out of or in connection with the employee's membership to a fitness facility or fitness program.
- 6.12 Employees agree to release and hold harmless his/her fitness counselor(s) or instructor(s) and all sponsoring agencies and their employees from responsibility for any injuries and/or illnesses he/she may receive as a result of participation in this program.

7.0 GENERAL INFORMATION

- 7.1 An approved Physical Fitness Program must meet the definition outlined above and cannot be used to offset such things as homeowner's association dues or country club memberships.
- 7.2 Physical fitness facility or program fees paid for by EMCBC are considered a taxable benefit. The total of those payments made by EMCBC will be reflected on the annual Wage and Tax Statement and the employee will be subject to tax on those amounts.

8.0 PROCEDURE

- 8.1 Staff member will download the program description from the EMCBC Services intranet site.
- 8.2 Read the program description and fill out the Physical Fitness Program Application Form and the Reimbursement Voucher for Employee Physical Fitness Program, which is found on the EMCBC Services intranet website under Forms.
- 8.3 Provide proof of annual individual membership or formal documentation that he/she is enrolled and participating in an ongoing fitness program, the completed forms, and a signed membership contract, if appropriate, to the Program Administrator.
- 8.4 The Program Administrator will approve or deny the request.
- 8.5 If approved, the Program Administrator will process the request through the Finance Department for reimbursement.

9.0 RECORDS MAINTENANCE

All Application Forms and Reimbursement Vouchers will be maintained by the Program Administrator and filed in the Office of the Director's Files.

10.0 FORMS USED

- 10.1 PD-340-01-F1, EMCBC Physical Fitness Program Application Form –
(Attachment A)
- 10.2 PD-340-01-F2, EMCBC Reimbursement Voucher for Employee Fitness Program –
(Attachment B)

11.0 ATTACHMENTS

- 11.1 Attachment A – PD-340-01-F1, ‘EMCBC Physical Fitness Program Application’
Form
- 11.2 Attachment B – PD-340-01-F2, ‘EMCBC Reimbursement Voucher for Employee
Fitness Program’

12.0 FLOWCHART
Not Applicable

EMCBC Physical Fitness Program Application Form

I understand the Environmental Management Consolidated Business Center (EMCBC) will pay the fees as outlined in the EMCBC Physical Fitness Program Description or subsequent version. I am personally responsible for additional fees, including family memberships, and food supplements.

I also understand that: (1) physical fitness facility or program fees paid for by the EMCBC are considered a taxable benefit; (2) the total of those payments made by the EMCBC will be reflected on the annual W-2, Wage and Tax Statement; and (3) I will be subject to tax on those amounts.

WAIVER/INDEMNIFICATION: I hereby agree to abide by all the rules and regulations that govern the use of a physical fitness facility or program. I agree that my membership to a physical fitness facility or participation in a fitness program is voluntary and is for my direct personal benefit. I acknowledge that my membership to a physical fitness facility or participation in a fitness program in no way involves the performance of my official work duties.

I agree that neither the United States Government, the EMCBC, nor any of their staff shall be liable for any personal harm, injury, or death that may occur to me or any other person or entity as a result of my use of the facilities, equipment, exercise activities, or diet including but not limited to any injury that may be sustained as a result of ill health or a pre-existing condition.

I further agree to indemnify and hold harmless the United States Government, the EMCBC, or their agents and employees from any claims, demands, and causes of action of every kind and character on account of bodily injuries, death, or damage to, or loss of property arising out of or in connection with my membership to a fitness facility or fitness program.

I hereby release and hold harmless my fitness counselor(s) or instructor(s) and all sponsoring agencies and their employees from responsibility for any injuries and/or illnesses I may receive as a result of participation in this program.

I acknowledge and agree that I should consult a physician and/or undergo a fitness evaluation and assessment in order to determine an appropriate exercise for me, and that I assume all responsibilities for obtaining such fitness evaluation and assessment prior to joining a physical fitness facility or fitness program.

<p>I UNDERSTAND AND AGREE TO THE ABOVE TERMS AND CONDITIONS.</p> <p>EMPLOYEE SIGNATURE:</p>	<p>WORK PHONE NO:</p>	<p>DATE:</p>
<p>NAME AND ADDRESS OF PROPOSED PHYSICAL FITNESS FACILITY OR FITNESS PROGRAM: (Attach general information brochures, cost outlines, facility capability statements, and sample contract.)</p>		
<p style="text-align: center;">PHYSICAL FITNESS ADMINISTRATOR</p> <p>I certify that the above employee has complied with the conditions and requirements as stated in the EMCBC Physical Fitness Program Description.</p>		
<p>SIGNATURE:</p>	<p>DATE:</p>	

EMPLOYEE INFORMATION:

*Privacy Act Statement: Executive Order 9397 allows Federal Agencies to use the social security number (SSN) as an individual identifier to avoid confusion caused by employees with the same or similar names. Supplying your SSN is voluntary, but failure to provide, when it is used as the employee identification number may mean that payroll accounting cannot be processed.

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EMCBC RECORD OF REVISION**DOCUMENT TITLE:** PD-340-01, Rev.2 Physical Fitness Program Description

If there are changes to the controlled document, the revision number increases by one. Indicate changes by one of the following:

- 1 Placing a vertical black line in the margin adjacent to sentence or paragraph that was revised.
- 1 Placing the words GENERAL REVISION at the beginning of the text.

Rev. No.	Description of Changes	Revision on Pages	Date
0	Original Program Description	All	02/07/06
1	Reviewed program description to update with Appropriation Law	Section 5	10/02/08
2	Chaged name from Health & Fitness Program to Physical Fitness Program	all	06/06/11
2	Periodic Review Update document format per IP-251-01, Rev. 2	All	06/06/11
2	3.0, added Applicability section removed EMPDC	1	06/06/11
2	4.1, section deleted	1	06/06/11
2	5.3, sentence 1 deleted	2	06/06/11
2	5.4.1, add sub-section	2	06/06/11
2	6.1, 6.2, & 8.2, change policy to program	2 & 3	06/06/11
2	6.3.1, change sentence for clarity	2	06/06/11
2	6.9 -6.13 new sections	3 & 4	06/06/11
2	8.2, add where to find the forms.	4	06/06/11
2	Attachment A-PD-340-01-F1, Rev 2 Physical Fitness Application Form Change policy to program thru-out document.	5	06/06/11

2	Attachment A-PD-340-01-F1, Rev2 Paragraph 3, sentence 1 deleted (and/or weight management program).	3	06/06/11
2	Attachment B –PD-340-01-F2, Rev 2 Change policy to program thru out document.	6	06/06/11
2	Attachment B—PD 340-01 paragraph, 3 deleted the annual membership. Changed one fiscal year or \$100.00 for six month usage period to within a 12 month period.	6	06/0611
2	Attachment B—PD 340-01 Paragraph 4, deleted semiannually up to annually on a on a fiscal year basis.	6	06/0611
2	Attachment B—PD 340-01 addition to paragraph 5, authorizing and certifying official signature lines.	6	06/0611
2	Attachment B—PD 340-01 accounting classification section updated to reflect data in STARS & BEARS	6	06/06/11